

**EEO COUNSELING/ADR
INTAKE INTERVIEW & ELECTION FORM**

EEO Office Contact Date:

Intake Interview Date:

Date of Incident:

Name:

Title, Series, Grade:

Organization (including mailing address):

Phone:

Social Security Number:

Admin. Code:

Supervisor (name, title, phone):

Basis:

Issue:

Claim(s): (Statement of Basis and Policy or Practice being challenged)

Responsible Management Official(s):

Remedy(ies) or Resolution Requested:

Have you: (a) filed a negotiated grievance or (b) appealed to the Merit Systems Protection Board on the same matter? If so, what date was the grievance or appeal filed and what is the status of the grievance or appeal?

Date ADR began: _____ Date ADR ended: _____

[Check one box.]

☐ ADR was successful - signed resolution agreement attached.

☐ ADR was unsuccessful.

1. ATTACHMENTS:

2. NOTES TO EEO COUNSELOR/ADR FACILITATOR:

ELECTION

I choose to address the claims I have raised above through the

☐ EEO Counseling

☐ Available ADR Process.

Signature of the Aggrieved

Date